Psychology of Men & Masculinity

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CITATION

Gilbar, O., Dekel, R., Spector-Mersel, G., & Levi, O. (2018, February 19). The Crisis in Achieving a Sense of Manhood Among Israeli Veterans Who Suffer From Posttraumatic Stress Symptoms. *Psychology of Men & Masculinity*. Advance online publication. http://dx.doi.org/10.1037/men0000148

The Crisis in Achieving a Sense of Manhood Among Israeli Veterans Who Suffer From Posttraumatic Stress Symptoms

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Although war is a central setting in which men are judged by their success in meeting gendered societal expectations, literature regarding the effects of (a) exposure to a combat event and (b) combat-related posttraumatic stress symptoms (PTSS) on a men's sense of masculinity is limited. The aim of the current study was to examine how Israeli veterans with PTSS perceived their masculinity as a result of the traumatic combat event. We also wished to better understand how they achieve their sense of manhood, while coping with PTSS, and the contributions of war and its aftermath to gender role stress in the Israeli context. A qualitative phenomenological study was conducted. Fourteen Israeli former combat soldiers with PTSS participated in comprehensive interviews in which common themes were identified via content analysis. The findings revealed two main changes in the veteran's sense of masculinity: (a) a crisis in achieving a sense of masculinity due to the traumatic event, and the veteran's self-perception as having failed to fulfill "manly" expectations, and (b) extremism in traditional masculine behaviors as compensation for that crisis. These findings point to how the PTSS-afflicted veteran's sense of manhood is affected by his perceptions of the ideal Israeli warrior, and how these perceptions contribute to a unique form of gender role stress: a narcissistic masculine wound, which may lead men to use violence and hypersexuality in an attempt to reclaim their masculinity. The role of attitudes toward traditional masculine norms in the process of treatment, change, and recovery is discussed.

Keywords: masculinity, manhood, trauma, veterans, PTSD

Based on the constructivist perspective, gender is a psychologically ingrained social construct, rather than an innate quality, that actively surfaces in everyday human interactions (West & Zimmerman, 1987). The World Health Organization (2009) defined gender as being the result of socially constructed concepts about the beliefs, values, attitudes, behaviors, actions, and roles that a particular sex displays. The individual, in turn, conforms to and exhibits these social and cultural norms—according to his or her gender—to gain social and individual recognition (Lindsey, Cremeens, & Caldera, 2010). According to the precarious manhood theory (Vandello, Bosson, Cohen, Burnaford, & Weaver, 2008), manhood is widely viewed as an elusive, achieved status or one that must be earned. Once achieved, "manhood status" is tenuous and impermanent; that is, it can be lost or taken away. Manhood is

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We thank Eve Horowitz Leibowitz for her help in preparing this article and for her valuable comments.

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confirmed primarily by others and thus, to be "proven," requires public demonstrations. As a result, many men struggle to prove their masculinity and fight off any threats they may feel, and these struggles bring about various consequences.

A possible result of not achieving the manhood status is gender role stress: Men are likely to experience stress when they judge themselves as unable to cope with the imperative male role (Eisler & Skidmore, 1987; Pleck, 1995), as well as anxiety about gender status, or, in other words, do my actions broadcast adequate manliness to others? (Vandello & Bosson, 2013). This stress and anxiety may, consequently, cause mental health (i.e., depression) and physical health problems (Addis & Mahalik, 2003; Hayes & Mahalik, 2000; Rice, Fallon, Aucote, & Möller-Leimkühler, 2013; Vandello et al., 2008). One of the ways in which men may cope with this pressure to prove their manhood is by engaging in risky behaviors (Vandello & Bosson, 2013). For example, men may drink heavily, drive fast, engage in extreme sports, father many children, and brag about their sexual exploits, especially in aggressive ways, as an effective means of restoring the manhood they feel they've lost (Bosson & Vandello, 2011).

In this context, the field of gender studies refers to diverse social and cultural constructions of masculinities and femininities, as being recognized and legitimate themes of being a male or female in a specific society (Fine, 2010; Haig, 2004; Nobelius, 2004). These cultural constructs create a model for the preferred form of masculinity, or hegemonic masculinity, meaning the kind of mas-

culinity that will, at times, be culturally exalted over other forms of masculinity (Connell, 1995). The army is one formal setting that provides a platform for men to prove this preferred form of masculinity (Vandello et al., 2008). In many societies, the army is a prime place to achieve male status, given that the "man-as-afighter" is one culturally exalted manifestation of hegemonic masculinity (Ben-Ari, 2001; Hockey, 2003; Morgan, 1994). The manas-a-fighter image is characterized by gender norms such as independence, risk-taking, aggressiveness, rationality, and heterosexuality (Alfred, Hammer, & Good, 2014; Connell, 1995; Higate, 2003; Levant, 1996; Shields, 2016). Although a new brand of masculinity-characterized by sensitivity, compassion, lack of authoritativeness, and empathy (Coltrane, 1996; Connell, 1995; Kaplan, 2009)—has arisen, it has not replaced the traditional masculinity model (Bokovza, 2017). In fact, the "man-as-afighter" model is still dominant in many societies (Caddick, Smith, & Phoenix, 2015; Green, Emslie, O'Neill, Hunt, & Walker, 2010; Sasson-Levy, 2006).

The Warrior as the Embodiment of Israeli Hegemonic Masculinity

The warrior as a representative of hegemonic masculinity has a particularly pronounced place in Israeli society. Embodying a strong alternative to the image of the passive, weak Diaspora Jew (the Jew who didn't fight back during the Holocaust; the non-Israeli Jew), the man-as-a-warrior became a central mark of the "new Jew," the Israeli, the *sabra*. This image corresponded with the first aspirations of the Zionist revolution (i.e., to transform the Jew from victim to victor). Moreover, it coincided with Zionism's second great purpose: building a Jewish state. The ideal of the man-as-a-warrior motivated young sabra men for military activity, thus serving the process of Israel's nation-building goals (Ben-Ari, 2001; Levy-Schreiber & Ben-Ari, 2000).

The image of the warrior as a reflection of Israeli masculinity established itself during the 1948 War of Independence. The Israeli soldier, perceived as a warrior, set the stage for representing hegemonic masculinity in the Israeli army (Ben-Ari, 2001). In Israel, this masculine ideal has also been applicable outside of the military and thus has a central role in defining manhood status throughout the entire life span of Israeli men, for three main reasons. First, Israel constitutes a "nation in arms," characterized by blurred boundaries between military and civilian sectors (Ben-Eliezer, 1994). As part of this blurring, the military ideal of the man-as-a-warrior has infiltrated into civilian society. Second, the continuous security challenges facing Israeli society—and, accordingly, the ongoing necessity of motivating young men to take part in military activity—preserve this ideal of masculinity. Third, military service in Israel is compulsory and includes reserve duty, which can extend until a man is in his 40s or even later. Thus, the man-as-a-fighter represents the height of masculinity among Israeli Jews and is a central component of Israeli men's achieving and demonstrating manhood (Lieblich, 1990; Nuttman-Shwartz, 2006; Sasson-Levy, 2006; Spector-Mersel, 2008). Kaplan (1999) called this ethos a narrative of "manliness is security," similar to Belkin's (2012) "military masculinity."

The significance of serving in a war, and the effects this service had on the combatants' manhood, was the subject of three studies, which examined three cohorts of Israeli men during four different wars (Lomski-Feder, 1998; Solomon, 1993, 1995; Spector-Mersel, 2008). Based on the participants' descriptions of their war experiences, these studies pointed to the central place of hegemonic masculinity in the context of war (Spector-Mersel, 2008). The perception of how the war affected the participants depended on their functions as men in combat (Lomski-Feder, 1998) and, in one study, the sense of losing their manhood as a result of their inability to participate in the Gulf War (Solomon, 1995). Although one study raised the possibility that a combat event might threaten an Israeli soldier's sense of masculinity as a result of the trauma (Solomon, 1993), no direct reference was made in these studies to the process of achieving and demonstrating manhood among veterans in this particular set of circumstances, which pose a threat to one's manhood.

The Failure to Achieve and Demonstrate Manhood Following Exposure to War

Around 80% of veterans experience acute stress reactions (ASRs) during combat, defined as participation in battle and therefore exposure to life-threatening events that may lead to feelings of horror, fear, and helplessness, potentially affecting combatants' inner worlds and leading to, among other things, psychological distress, that is, reexperiencing the traumatic event, anxiety, alertness responses, and sleep problems (Bleich, Gelkopf, Melamed, & Solomon, 2006). Males with ASR may feel that they are not living up to the man-as-a-fighter model and express gender role stress resulting from both internal and external unmet expectations (Brooks, 2001; Shields, 2016). ASR may therefore cause a threat to the men's perceptions of achieving manhood, specifically achieving the "man-as-a-fighter" manifestation of it (Solomon, 1993). In addition, this inner feeling may be reinforced by societal beliefs that the soldier has not demonstrated the expected level of manhood, and has thus been labeled weak (Lomski-Feder, 1998; Smith, 2002).

Such a failure in achieving and demonstrating manhood in combat may derive from the discrepancy between the man's vision of his actual self and the ideal masculine self as conceived by the culture around him—an ideal internalized by him (Fox & Pease, 2012; Meissner, 2005; Parson, 1993; Shields, 2016). In Israel, this discrepancy may be most intensely experienced during compulsory military service, which takes place between the ages of 18 and 21—a particularly vulnerable developmental period of identity formation (Erikson, 1968; Wilson, 1980, 2006). The experience of loss of control and helplessness in a soldier who perceives himself as having been a failure in battle may harm his sense of masculine grandiosity ("I am a man and can do anything!").

Gender role stress is one potential result of this failure (Brooks, 1990). In addition, a perceived loss of one's masculinity might cause a masculine narcissistic wound. Parson (1988, 1993) suggested that this narcissistic wound manifests itself in feelings of helplessness, weakness, inferiority, and subjective lack of ability. It is a wound that damages self-esteem (Layton, 2005; Tracy, Cheng, Martens, & Robins, 2011), and may later influence the man's capacity to adjust to civilian life (Parson, 1988, 1993; Ulman & Brothers, 1988; Wilson, 2006). Veteran testimonials have attested to the difficulty of openly achieving and demonstrating models of hegemonic military masculinity in times of war events. Studies among American men, during World War II

(Showalter, 1987) and the Vietnam War, have documented that men who did not meet expectations associated with the man-as-a-warrior ideal experienced pressure, distress, and a threat to their sense of masculinity (Karner, 1994; Smith, 2002). Nevertheless, the question regarding what happens in other cultural contexts vis-à-vis men's sense of manhood following traumatic combat events—specifically when they fail to endorse masculine role norms—and how this trauma affects their sense of manhood when they return home, thus far remains unanswered.

The Precarious Manhood of Veterans With Posttraumatic Stress Symptoms After Their Return Home

Unsurprisingly, soldiers do not only have trouble in achieving and demonstrating manhood during the period of their military service. Between 4% and 17% of male military veterans experience posttraumatic stress disorder (PTSD) following their participation in combat, and they may also experience related ASRs (Creamer, Wade, Fletcher, & Forbes, 2011; Richardson, Frueh, & Acierno, 2010). Many more—who do not meet the full criteria for a PTSD diagnosis—still suffer from intense posttraumatic stress symptoms (PTSS; Bleich et al., 2006). The distress that these men with PTSS experience might bring about additional difficulties for them, because of their subsequent inability to fulfill hegemonic masculine expectations upon their return home from war. This inability may stem from their difficulty in readjusting to civilian life after military service, or it may be due to the distress caused by the PTSS (Brooks, 1990, 2005), or both. A few studies have shown an association between PTSS and masculine gender role distress among this population (McDermott, Tull, Soenke, Jakupcak, & Gratz, 2010; Morrison, 2012), or a gap between army and civilian expectations (Karner, 1994; Smith, 2002). Other studies, however, have not found a connection between PTSS and masculine gender role distress (Jakupcak, Osborne, Michael, Cook, & McFall, 2006). Therefore, it is not clear whether the veterans' difficulties upon returning home stem directly from the PTSS or whether they stem from the related dysfunctions.

The men's perceived loss of masculinity may also lead to a psychological injury, such as the previously discussed narcissistic wound, when they return home (Parson, 1988, 1993). This injury might be a result of the impairment caused by the PTSS, which led to feelings of helplessness, weakness, and inferiority (Parson, 1988, 1993; Ulman & Brothers, 1988). However, there is still a question regarding what the sense of manhood means to the veteran with PTSS, and how he achieves masculinity so as to earn "manhood status."

Most of the studies in the field have focused only on the connection between PTSS and gender role norms (Cox & O'Loughlin, 2017; Garcia, Finley, Lorber, & Jakupcak, 2011; Jakupcak, Blais, Grossbard, Garcia, & Okiishi, 2014; Lorber & Garcia, 2010). Researchers have found different constructs of machismo (i.e., emotional restrictedness) that are associated with PTSD among veterans with PTSS (Herrera, Owens, & Mallinckrodt, 2013). In addition, higher levels of emotional toughness in veterans—a traditional male gender norm (i.e., sanctions against the expression of vulnerability)—have also been found to be associated with increased levels of PTSD (Jakupcak et al., 2014). Although these results may indicate that endorsed gender role

norms among veterans with PTSS might be the men's way of restoring their sense of manhood after losing it, the research findings do not prove that this connection stems from the threat to perceived manhood.

The Current Study

Given the frequency of wars throughout Israel's history and the overwhelmingly high participation of men in these wars throughout their lives (the battlefield therefore serving as a central place for them to achieve manhood), Israel is a particularly relevant context in which to examine the mechanism of gender role stress among men with combat-related PTSS. This previously unstudied cultural context for looking at such a phenomenon might help us understand the mechanism by which masculinity is achieved in general, and when an extreme threat is posed to their manhood in the aftermath of combat-related crises in particular. In addition, this study may help reveal how veterans—living their lives under the psychological effects of traumatic combat events-demonstrate and achieve their sense of masculinity when they return home. Therefore, the aim of the current study was to broaden the understanding of men's sense of manhood following traumatic combat events and related PTSS, and the way they earn manhood status, specifically when they have failed to endorse masculine role norm expectations. Finally, we wished to look at the possible contributions of both war and its aftermath to gender role stress in the Israeli context.

Method

The Research Paradigm and Perspective

The present study draws on the paradigm of constructivism (Denzin & Lincoln, 2011), which assumes a relativist ontology (i.e., there are multiple realities) and a subjective epistemology (i.e., individuals understand themselves and their world through subjective meanings). As Creswell (2013) emphasized, because these meanings are varied and multiple, the researchers must rely on the participants' views. Guided by this theoretical groundwork, the present study followed an inductive rationale, aiming to generate *emic* knowledge: specifically, the participants' constructions of themselves as men and their perceptions of their masculinity against the backdrop of the traumatic event. Rather than testing previous assumptions, we sought to delve into the participants' interpretations and experiences of their masculinity and their relation (or lack thereof) to the traumatic event and consequent PTSS. In accordance with constructivism's emphasis on culture as a major factor in processes of interpretation, we assumed that the meanings the participants attributed to the concept of masculinity would be highly embedded in Israeli culture, as previously portrayed.

To gain insight into a man's sense of masculinity and the way in which former combatants who suffer from PTSS achieve it, we used a phenomenological approach to inquiry. As Creswell (2013) explained, in a phenomenological study, the researcher looks at the common meaning for several individuals of their lived experiences of a concept or a phenomenon. In accordance with this idea, the study's goal was to understand the participants' "lived experience" regarding their masculinity.

Participants

The sample originally consisted of 16 participants, who were chosen according to criterion sampling (Patton, 2002). The participants were required to be men who (a) had been suffering from PTSS because of their participation in battle, (b) were receiving treatment now or in the past for posttraumatic distress, (c) were able to articulate and communicate their experiences, and (d) were assessed by their therapists as not being under acute distress. Of the 16 interviewees, one refused to have the interview recorded and to sign the informed consent form; another did not speak clearly enough for the interview to be transcribed fully. Thus, the study was based on 14 interviews. Because the major themes appeared in most of these 14 interviews, and because the interviews that were not included revealed no substantial new information, we decided that we had reached "theoretical saturation" (Glaser & Strauss, 1967), and there would thus be no need for further interviews.

To provide as wide an understanding as possible of the topic under study (Patton, 2002), we attempted to recruit a variety of participants (see "Procedure") in terms of socioeconomic background, age, type of traumatic event they underwent (e.g., in a full-fledged war vs. a short-lived conflict), military roles, physical and nonphysical injuries, country of origin, education, level of functioning, marital status, and number of children.

All of the participants were Jewish, and of those, seven were Israeli born. Participants' ages ranged from 27 to 67 (M = 44, SD = 33.02). The age variance was also expressed via the age at which the traumatic event took place: For 10 participants, the traumatic event took place at age 18, during their compulsory military service; for four, it took place when they were reservists, and therefore older (24, 28, 28, and 40). Three interviewees reported that they had been exposed to multiple battle events and/or wars during their military service, but that the main traumatic event was the specific one they mentioned. Eleven participants served in combat positions, whereas three served in support positions in combat units. Eight participants sustained light-tomedium physical injuries in battle. At the time of the study, seven interviewees were married (two for the second time), four were divorced, and three were single. Ten of them had 12 or more years of formal education, whereas four had less than 12 years of formal education. At the time of the interviews, five men were working full-time, two were working part-time, and seven were unemployed (it should be noted that their unemployment was not related to their age). All participants were recognized by the Rehabilitation Department of the Ministry of Defense as suffering from PTSD: an official recognition based on clinical assessments. However, because we did not have these assessments in our possession, we decided to err on the side of caution and defined them as suffering from PTSS and not PTSD. At the time of the interviews, the participants reported a range of intensity and frequency of PTSS and a range of accompanying functional difficulties that accord with the Diagnostic and Statistical Manual of Mental Disorders criteria for PTSD (American Psychiatric Association, 2013).

Procedure

Potential interviewees were contacted by therapists known to the first author, who worked with veterans suffering from PTSS in both civilian and military frameworks. The first author then marked off suitable candidates, and after the therapists received clients' approval, they gave the first author the clients' contact information. Subsequently, the first author contacted the potential participants by telephone, presenting himself and the research topic, and verifying candidates' suitability for the study according to the set criteria. If the candidate was found suitable and if he expressed a willingness to participate in the study, an interview was set at a time and place of his choosing. All of the interviews were conducted by the first author, most of which took place in the interviewees' homes, with three taking place in rehabilitation facilities, and all lasting between 1 and 3 hr. Before and after each interview, the interviewer completed a research diary. This tool served two aims. First, it enabled the documentation of statements or comments made by the participants that were not recorded (e.g., in a telephonic conversation), offering an important context in which to understand the recorded data. Second, as the research diary is a principal tool for reflexive research practice (Nadin & Cassell, 2006), we used it as such in this study. The first author's previous expectations regarding the participants and the interviews—and his reactions, thoughts, and emotions following the meetings-were documented and shared with the other researchers. Engaging in this process helped the research team identify the principal researcher's subjectivity, thus lessening its effect on the data interpretation.

Data gathering and analysis. The first author conducted indepth qualitative interviews (Josselson, 2013; Rubin & Rubin, 2012). These interviews were based on an interview guide designed to explore the participants' lived experiences and perceptions of their masculinity. Drawing on a constructivist foundation, which poses an inductive rationale, the interview consisted of broad open-ended questions, so that the participants could construct their own meanings (Creswell, 2013). Thus, open questions were asked about the participants' childhood and adolescence, their military experiences, the traumatic event that led to their PTSS, and the personal, social, familial, and occupational aspects of their lives in the time since. Specifically, participants were asked to describe their life before and after the combat trauma. Although some of them mentioned other potentially traumatic events, they indicated that the combat event was the one that had most affected them. In addition, participants were asked about their views of their masculinity and whether—and, if so, how they believed these views had changed due to combat and due to their PTSS. The first author did not ask the participants specific or leading questions related to specific changes in or perceptions about their sense of manhood (i.e., their crisis in achieving manhood).

The interviews were recorded and transcribed verbatim. Following Moustakas' phenomenological approach (Creswell, 2013), the analysis included three phases. First, significant statements were identified in the texts, that is, sentences that provided an understanding of the participants' experiences ("horizonalization"). These statements were then merged into clusters of themes, with the aim of offering detailed descriptions of "what" the participants had experienced—in terms of their sense of manhood—and "how" they had experienced it.

These significant themes were then used to write a "textural description" of the veterans' experiences and the contexts that influenced these experiences (a "structural description"). The goal

of the last phase of the analysis was to provide a composite description that would present the *essence* of the phenomenon under study, that is, the experience of sense of manhood among veterans with PTSS resulting from participation in battle.

Credibility. A trustworthy qualitative study is credible, transferable, reliable, and reproducible (Lincoln & Guba, 1985). In an effort to ensure the study's credibility, three main tasks were performed. First, throughout the analysis, a research diary was maintained, in an attempt to bracket the first author's personal attitudes and feelings toward the participants so that these would not color the interpretation. Second, the analytical insights were regularly discussed among the four authors, with the goal of reaching a consensus. In addition, the major findings were presented by the first author at Bar-Ilan University's Forum for Qualitative Research. The forum members' comments on the integration of the findings helped the research team identify the principal researcher's subjectivity, which could have potentially influenced the interpretation of the findings, and increased the study's credibility.

The third vehicle by which to attain credibility is the "reflexive gaze" (Lincoln & Guba, 1985). As Creswell (2013) noted,

researchers adopting this interpretive framework understand that they are not without bias; know that their own personal, cultural and historical background exerts an influence over their ideas; and acknowledge that they must take into account the role played by their own subjectivity. (p. 25)

In fact, the interviewer's characteristics affect not only the interpretation of the data but also its mere production. In the current study, the reflexive gaze pertained principally to the first author: a male clinical social worker in his mid-30s who treats veterans suffering from PTSD. These characteristics—which could have affected the interviewees' comfort level and their idea of what content would be appropriate to bring up in the interview—appear to have encouraged the participants' openness. For instance, a number of participants asked whether the interviewer had served in a combat unit, a question which presumably helped them figure out whether they would need to "explain" the significance of being a combat soldier. To reduce the influence of such information on the participants, they were encouraged to ask the first author any personal questions they had.

In addition to the first author, there were, as indicated previously, several other researchers involved in the study, each bringing his or her own clinical and research experience to the table. Because these researchers consisted of both men and women who had been exposed to different manifestations of masculinity among Israeli military veterans with PTSS, they did not approach the current study with any particular attitude or expectation regarding the effects of combat and related PTSS on achieving and demonstrating masculinity. In addition, the four authors' perspectives were intensively discussed during the collection, analysis, and interpretation of the data, thereby increasing the study's credibility.

Ethical aspects. This study received ethical approval from Bar-Ilan University. All participants were told that if they did not wish to continue the interviews, they would be stopped immediately; the interviewer also assured participants that support would be available should they experience emotional distress in the wake of the interviews. This support included open access to their

therapists, as well as to the first author, an expert in the field. In two cases, the first author contacted the participants' therapists—with the participants' consent—to keep them posted regarding participants' reactions to the difficult material brought up in the interviews. To protect the participants' anonymity, their ages, their names, and those of anyone else mentioned in the interviews were disguised in the article, as were the names of all places, wars, and military operations.

Results

The current article focuses on two specific themes within the larger theme of the ways of doing manhood among military veterans: the crisis in achieving and demonstrating manhood and the radicalization of traditional masculine roles. The crisis in achieving and demonstrating manhood among the interviewees refers both to the traumatic event itself and to what happened in its aftermath.

The Crisis in Achieving and Demonstrating a Sense of Military Manhood

The crisis in achieving and demonstrating manhood was found to be a central theme in this study. It appeared in several regards, in all of the interviews.

An experience of loss of control and helplessness. The participants expressed feelings of loss of control and helplessness during and after the event. Six interviewees drew a connection between the experience of loss of control/helplessness during the traumatic event and damage to their perception of their masculinity.

Moshe: I felt like a total nothing . . . the feeling was . . . that I was nothing, how could I have managed to be hit from behind, that was the source of all the, the, the . . . depression and for the . . . the fact that it was from behind . . . it would have been one thing if I'd seen someone shooting at me, and if I didn't hit him, and he hit me, then I deserved it . . . but this way I didn't have an option . . . ah . . . and this really kills me . . . it broke me, as a man [emphasis added]

Interviewer: As a man?

Moshe: Yes . . . the . . . this helplessness, the key word is helplessness . . . there's nothing you can do . . . I'm not a person who's in control all the time, but . . . when you're not in control and something happens to you that, that's tragic, dangerous $\{^1, \ldots\}$ and that, and that you have no control over it, then you . . . you're not a man and that damages your manhood, there's no doubt . . . [emphasis added]

The perception of damage to one's sense of masculinity after a traumatic event, resulting from the feeling of helplessness during the event, can be heard in Sharon's words as well: "The uncertainty and that helplessness. It damages everything in you, so it also damages your manhood, and in the period afterward you know that, you're already aware, {...}, it frustrates ..." [emphasis added]

Not living up to the standards of being a man. The perception of harm to one's sense of masculinity is also expressed

¹ This symbol means that irrelevant sentences were deleted by the authors.

through the continuing internal dialogue around the inability to fulfill what the interviewee and society view as manliness. These internal dialogues took place both during the traumatic event and afterward.

Not living up to the standards of being a man during the event. Some of the participants described their functioning during battle as not being in accordance with their previously held perceptions of "manliness"; this lesser (perceived) performance caused damage, in their opinions, to their sense of masculinity. Elie described the breakdown of his expectations of himself in the context of his traditional masculine role, which occurred immediately after a battle during the Six-Day War.

... From time to time someone would come, I spoke, I answered like a kind of yes, {...}, but I just wept ... I do not know whether, if I felt sorry for myself, if I felt sorry for the, the stereotype of, of myself in my own eyes that had been broken, if, if, if for my friends who had been killed, for, for the situation, for that, mmm, that those ... could even place us, the heroes, the men, in that situation, how could we even be injured, I mean we, we couldn't be injured. Where did they even get the, the, those ... who every war take their boots off and run away, where did they get the courage to fight us, we are the best in the world, nobody can beat us. We are the champions ... [emphasis added]

And Yoram, a young veteran, described similar feelings of disappointment in himself in regard to his participation in the Lebanon War.

I didn't function like I had imagined when I was a child in the second grade devouring my father's books on the Six Day War or or the Yom Kippur War . . . on the tales of heroism and fortified bunkers and things like that. So I didn't function, I didn't get a medal there, and it really suited my manliness that I should get a medal there, you understand? That is, that . . . at the beginning, beginning, when I was in a vacuum with just myself, then it, then it hurt. [emphasis added]

Not living up to the standards of being a man after the event.

Participants experienced this feeling mainly in relation to their lack of functioning, due to their PTSS, in various spheres of life that they saw as connected to traditional masculine roles. Some of the interviewees were in constant internal and external (toward their surroundings) dialogue with regard to one or more specific spheres that were affected (e.g., work, family, and sex), whereas others referred to a combination of spheres that were damaged and that affected their sense of masculinity. In addition, some of the interviewees identified the source of their masculinity wound (i.e., PTSS or the related impairment) directly, whereas for others this connection was more subtle. In these cases, the connection was not revealed explicitly by the participant—who merely described his PTSS or the impairment afterward—but rather was later discovered through the researchers' interpretation of the interview.

Damage to the role as breadwinner. Several of the interviewees described the damage that had been done to their ability to work due to their PTSS—an ability that they, like society in general, viewed as a distinctly traditional masculine role—and how it harmed their sense of masculinity. They reported that as a result of their inability to hold down a regular job, and at times to work at all, they felt that they were not living up to expectations of them as men. In their view, working and providing for the family

form a central part of one's role as head of the family, and therefore being unable to do so injures one's perception of one's sense of masculinity. Yeheskel refers to it in this way:

If you cannot, cannot go to work and provide for your family, then, it, it, it, it, it's the ABCs of masculinity, I think, yes? Then you, like, do not fulfill your function as a man in the family at all . . . you have to let your wife go and earn a living and things like that and you have to fight with the Ministry of Defense. It doesn't, it doesn't go down well in the family. *And it damages your, your masculinity*. [emphasis added]

Afterward, he refers to the internal dialogue he conducts with himself about society's attitudes toward veterans with PTSS:

For many years I tried not to go to parent meetings . . . I would for example think about what I might say if I were asked where I worked. That question would just be thrown at me. My daughter would hear me being asked that question, and what would I say. I do not look as if I have no arms or legs, do I? You look whole and what will they say if you were, if you do not work. What am I supposed to say? So here the image, here your masculinity is erased in an instant. [emphasis added]

Damage to sexual functioning and as a partner. Damage to their sexual functioning caused the interviewees a feeling of inferiority that then harmed their sense of masculinity. Zvi, specifically making an association between his current sexual functioning and the trauma he underwent, refers to it in this way:

I was not good in bed. I felt my, my manhood was damaged. I didn't understand that I was not good in bed because of the trauma. I was not aware of that . . . mm . . . I couldn't keep a relationship. I couldn't keep it. I couldn't understand why . . . The expressions I gave to the masculine connection, we talk about masculinity, we talk about the, the relationship within a couple, because what is a man for the opposite sex? He's a partner toward the world, against the world. I didn't know. I didn't know there was anything there. [emphasis added]

Gil was asked to describe his sense of masculinity after returning home. He described the effects of the damage that had been done to his relations with a partner in general, and to sex in particular, on his masculine image:

When I think about being almost 34, you know, and I do not yet have, I do not have a girl . . . I know what my abilities are and I know that something is blocking me from reaching them. So I say to myself, how much I can sell myself as a man to a girl . . . (silence) . . . And of course there's the . . . the matter of sexual functioning, that I, I cannot ever know in advance what my performance will be like. Sometimes just the fear that the thoughts will come brings them (silence). So, is there damage to my masculine image? Is there ever! [emphasis added]

Damage to social ties. The ability to sustain social connections is yet another function that can be damaged as a result of the PTSS experience, and this hindered ability was also presented by interviewees as causing harm to their sense of masculinity. Aharon said, "Posttrauma can, like, damage masculinity very much." He went on,

Your, your, your openness toward people, your speaking with people . . . the moment you do not leave the house, and the moment you do

not call people, then your like self-feelings are low, like OK, I'm nothing, I'm a loser, I'm aah what am I doing here at all, this life doesn't suit me, mmm . . . and aah . . .

Radicalization of Traditional Masculine Behaviors as a Result of the Crisis in Achieving a Sense of Masculinity

Ten interviewees reported that—upon returning home with PTSS—the trauma they suffered and the subsequent crisis in their sense of masculinity caused a radicalization of traditional masculine behaviors as compensation after the traumatic event. These interviewees described both violent and hypersexual behavior in their sexual relations with women. Some of the interviewees described these behaviors as having taken place in the past—during the period following the trauma and the return to civilian life—and as a result of the PTSS. Nevertheless, most of these behaviors were related to events that were still happening in the participants' lives as well. Although the interviewees described the changes and radicalization in their behavior due to their experience of the traumatic event, most of them attributed this behavior to the damage to their sense of masculinity that they experienced *after* the trauma, as a result of the PTSS.

Aggressive and violent behavior. Nine interviewees described behaving violently and aggressively as a result of the crisis in their sense of masculinity. Oren explained how the inability to carry out "masculine" duties as a result of his PTSS, such as household repairs, caused him to feel humiliated, which in turn led him to behave violently and aggressively:

From there, just, like I said before, hammering nails and drilling holes and that, also stuff that I couldn't really do . . . aah . . . and a friend would come, and someone's father would come, here and there handymen would come, you feel you know, . . . aah . . . like, not humiliated . . . sort of taken down a peg, I do not know how to say it . . . because there are things I cannot do (laugh) and it's, it's a bummer. Aah it takes something from you (silence). In retrospect I saw that it was, like, influencing other things. Because it was so frustrating I would, like, take it out just in irritation. It was in shouting and it was in quarrelling and it was in outbursts of rage . . . as if I was trying to be a cockerel, you know, at the expense of other things. (silence)

Micha, another participant, described himself after the trauma as being like "an injured lion." That is to say, he saw himself as a man who, as a result of the trauma, lost all of his "manly strength" and, out of anger over this loss, acted violently.

Hypersexual behavior. Four interviewees described having made use of hypersexual behavior to compensate for the loss of their sense of masculinity. Some of them described a feeling of making up for something, whereas others said that dating women and having sex with them gave them more self-confidence.

Yigal directly described the effect that his sexuality and his relationships with women had on his posttrauma psychological state, when he returned home and had to cope with PTSS:

In my difficult situations, when I had every reason to sink into a deep depression, maybe even to commit suicide . . . maybe to be committed . . . and yet I managed the whole time to get myself girlfriends . . . who

gave me an opportunity to conquer them and maybe that's where the cure was hidden . . . it really really could be.

Gil described it thus:

And . . . it was expressed mainly in bed. Much more there, I was much more aggressive . . . and before that, again, it used to be purely romantic . . . at the moment I'm examining the possibility that I was actually transferring my rage from there in a kind of sublimation, I took it out in the bedroom with a partner who was interested in that, who liked that . . . But it was very, very clear . . . aah . . . the before and the after. It was completely different. It was also a matter of the masculine image. I know that . . . it would have been difficult for me to go out with just anyone. I tried going out with women . . . suddenly I couldn't date dominant ones. Before, I could.

In essence, as a result of the trauma they suffered, some of the interviewees described resorting to a radicalization of traditional masculine behaviors—or what appears to be a way of restoring their lost masculinity.

Discussion

The current study examined manhood perceptions among veterans who suffer from combat PTSS. We wished to broaden the knowledge about men's sense of manhood in one of the central settings in which men are expected to prove their masculinity and in which their masculinity is threatened. Specifically, the study examined the effects of combat trauma and the consequent PTSS on a man's achievement and demonstration of manhood, as well as the effects of combat trauma and PTSS on gender role stress (Cox & O'Loughlin, 2017; Fox & Pease, 2012; Shields, 2016). A unique aspect of the study was the fact that it was conducted in a setting particularly relevant to the subject: an Israeli society whose cultural standards promote military masculinity and traditional gender role norms for earning manhood status (Ben-Ari, 2001; Spector-Mersel, 2008).

In the two themes presented in the findings, it is clear that the participants experienced a crisis in achieving and demonstrating a sense of manhood, both during the event and after their return home, and that this crisis resulted from the traumatic combat event and the consequent PTSS (Caddick et al., 2015; Fox & Pease, 2012; Green et al., 2010). In addition, these findings support the existing literature showing that achieving manhood status is central to men's inner lives and crucial for their psychological health. The findings also show how difficult it is to achieve such a status when men fail to adhere to traditional masculine norms (Hayes & Mahalik, 2000; Vandello & Bosson, 2013; Vandello et al., 2008).

The participants described how the crises they experienced in achieving a sense of masculinity stemmed from their inability to live up to their own expectations of themselves as Israeli soldiers. This inability prevented them from being able to "feel like men," given the definitions of men that they had internalized and that are based on hegemonic models of masculinity (Brooks, 1990, 2001; Karner, 1996). More specifically, they described how they could not live up to their perceptions of their fathers' wartime "man-asa-fighter" demonstrations of manhood nor that of other Israeli combat soldiers in other wars (Solomon, 1993). As Israel generally undergoes some sort of violent conflict every few years, there are seemingly endless opportunities for the younger generation to compare themselves with the mythic older generations: those who

fought in the early wars of the state. These findings reinforce the central role of cultural influences and society's expectations in the attainment or threat of loss of manhood status (Vandello et al., 2008). Specifically, this study's findings describe how Israeli society, which emphasizes a particular kind of manhood performance—and which sees men as failures if they do not succeed in their "man-as-a-fighter" roles during wartime—may perpetuate a threat to a man's sense of manhood throughout the generations. The combat-related crises that these men underwent affected their roles as men. The experience of helplessness and loss of control during the traumatic event, described by the men in the study, affected their ability to achieve and demonstrate "man-as-afighter" manhood. Helplessness has already been found to be one of the main results of the fear and horror that an individual experiences when exposed to traumatic events, and especially traumatic events endured in combat (Brewin & Holmes, 2003). Our findings therefore strengthen the possibility that this kind of helplessness is also connected to the crisis of losing one's sense of masculinity during the event. Although the "man-as-a-fighter" image may stay alive in the minds of Israeli males, the reality often does not match the fantasy: Essentially, expected masculine norms are not met, gender role stress ensues, and the potential result is a narcissistic wound. The participants emphasized that the crisis in their sense of masculinity caused them to feel helplessness, weakness, inferiority, and a subjective lack of ability. This crisis seems to play a central role in veterans' distress, and aligns with views of Meissner (2005), who believed that feelings of helplessness can undermine a man's autonomy, potentially harming a major component in the development of his masculine narcissism: the normative belief that he can do anything. Moreover, this kind of distress can appear even when the traumatic event occurred at a later age (i.e., during a man's reserve duty), a finding that also seems to highlight the psychological effect of the threat to manhood regardless of the age at which the event happens.

In addition, we found that this feeling of "manly inadequacy" often persists on the man's return home after war. Part of an Israeli man's masculinity is defined by his ability to maintain the "manly" role of breadwinner, head of the family, and social success (Ben-Ari, 2001; Bokovza, 2017), roles he can no longer fulfill as a result of his PTSS (Solomon, 1993). The effects of an unendorsed sense of masculinity might serve to perpetuate gender role stress through narcissistic wounds, as the soldier cannot do what is expected of him as a man (Parson, 1993), even when he returns home to the domestic scene. This dysfunctional impairment has been studied previously, but little attention has been paid specifically to the possible effects of this impairment on the veteran's sense of manhood.

Participants described a radicalization of traditional masculine behaviors as a way of compensating for the crisis in achieving a sense of manhood. Most of the interviewees revealed various expressions of aggressiveness and violence—manifestations that have also been found in previous research (Beckham, Lytle, & Feldman, 1996; Novaco & Chemtob, 2015; Taft, Watkins, Stafford, Street, & Monson, 2011). Some interviewees revealed hypersexuality, which is also described as a masculine gender norm. Therefore, our findings provide support for the idea that the association between PTSS and gender role norms—which has been found previously (Garcia et al., 2011; Herrera et al., 2013; Jakupcak et al., 2014; Lorber & Garcia, 2010)—might stem from

the crisis in achieving a sense of manhood (Brooks, 2001; Caddick et al., 2015; Karner, 1994; Smith, 2002). Specifically, these findings support the idea of what Parson (1993) called "instrumental narcissistic behavior," a mechanism that comprises an attempt to cope with the pain of a continuous narcissistic wound and through which the individual can achieve a certain level of self-unity. These instrumental narcissistic behaviors might constitute a response to the threat the men feel to their sense of manhood, brought on by the previous traumatic event, the consequent PTSS, and the related impairment. As suggested by the precarious manhood theory, these behaviors may serve as a way for men to restore their sense of masculinity after it has been threatened (Vandello et al., 2008). In addition, the results emphasize the central role of aggression as a strategy for restoring the sense of manhood (Bosson & Vandello, 2011); this aggression might also be specifically related to military masculine norms (Alfred et al., 2014; Connell, 1995; Higate, 2003). However, further research is necessary to determine what the exact threat to the sense of manhood consists of (i.e., exposure to the combat event, consequent PTSS, or related impairment), as this threatened sense seems to bring about destructive behaviors.

An additional finding was the observation of a bilateral ongoing inner dialogue. The participants' internal dialogue was presented as referring to those social positions they needed to maintain to achieve a sense of manhood, in keeping with what they saw as society's perceptions of idealized hegemonic masculinity norms. The implications of this kind of inner dialogue for a veteran's masculinity have previously been mentioned in the literature (Caddick et al., 2015; Fox & Pease, 2012; Shields, 2016). Nevertheless, the current study shows how the men also engage in this type of inner dialogue long after the traumatic event occurs—an illustration of the ongoing threat to one's manhood status (Vandello et al., 2008). The existence of this ongoing dialogue also raises the possibility that the failure to achieve a sense of manhood may eventually lead these men to psychopathological distress such as PTSS and dysfunctional behaviors. Although previous research pointed to the possible effects of such gender role stress on mental health problems (i.e., depression and stress; Hayes & Mahalik, 2000; Vandello & Bosson, 2013)—specifically among this population in the context of doing manhood (Smith, 2002)—these issues should receive more attention in the research and clinical literature.

The current study has a number of limitations. First, the results of this study should not be generalized to all veterans with PTSS. The study did not examine these issues in relation to soldiers who were not in direct combat or soldiers who served in other roles (i.e., officers as compared with troops). Other war-related aspects, such as commanders' leadership abilities and functioning during the traumatic event, were also not taken into account. Furthermore, although the participants point to the combat event as the main traumatic event, we cannot differentiate between trauma that may have been caused by event characteristics (e.g., ongoing events compared with one specific event), other events in their lives, and trauma caused by the combat event in question. We would, however, recommend that these issues be studied further, by assessing the veteran's level of exposure to various traumatic events. In addition, half of the participants—based on their reports—were unemployed not because of their age (i.e., their unemployment was not due to their being of retirement age), a finding that may indicate that these participants reflect a subset of this particular population (i.e., combat soldiers) who were suffering from greater-than-average mental health challenges. Of course, one might also draw this same conclusion on the basis of the fact that these men were seeing mental health professionals. Another limitation is that although participants were recruited by therapists who referred only PTSD patients to us, these patients did not come with a fully detailed diagnosis. We therefore refer to them as having PTSS rather than PTSD. In addition, one of the requirements for study participation was that the participant had to be in contact, either formerly or currently, with a helping professional. As such, the findings reflect a conception of sense of manhood that may have been influenced by the participants' experience in therapy.

Conclusion

The uniqueness of the study lies in its specific focus on "doing masculinity" among veterans with PTSS, a subject which has received little attention. The study sheds light on the phenomenology of the crisis in achieving a sense of masculinity in veterans who suffer from PTSS, and especially on the role played by gendered expectations in Israeli culture. It also sheds light on how the failure to achieve a sense of masculinity can have serious ramifications both for the male military veteran and for those around him. The clinical contribution of the study is its illumination of the centrality and fragility of the sense of masculinity and the importance of helping men with PTSS construct a new and integrated sense of masculinity. The encouragement and shaping of new conceptions and beliefs about what masculinity is will help redefine it, strengthen it, and help men to find new and less destructive ways to achieve manhood status, all of which will contribute to improving men's psychological health.

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Received January 12, 2017
Revision received October 10, 2017
Accepted October 15, 2017